

Inclusionary Housing Rental Program
Preliminary Application & Guidelines for
Rental Applicant Pool

344 Broadway, 3rd floor Cambridge, MA 02139

PLEASE READ CAREFULLY BEFORE COMPLETING THIS APPLICATION

The Community Development Department is accepting preliminary applications for affordable rental units. The Rental Applicant Pool is used to identify eligible applicants for affordable rental units available through the City's Inclusionary Housing Program. Affordable units of all sizes are located throughout the city. To be considered for an affordable rental unit you must be in this Pool. This preliminary application is for placement in the pool. Placement in the pool does not signify that you are eligible for an affordable rental unit. Not all applicants will be eligible for all units. This is not a waiting list.

Applicants will be placed in a waiting pool based on unit size eligibility and ranking according to the City's priority point system. Preference will be given to Cambridge residents and families with children. When units become available CDD will identify, in order of placement in the pool, the next applicant(s) based on unit size eligibility and priority points. The applicants will be asked to submit a final application with documentation to determine their eligibility.

Please be sure to fill out the application accurately. Applicants will be placed in pools based on their priority points, household size and emergency need status. <u>If you do not fill out the information correctly and submit the required documentation</u>, you will not be placed in the appropriate pool.

Applications should be submitted to the City of Cambridge, Community Development Department 344Broadway, 3rd floor, Cambridge, MA 02139. <u>Applicants must complete and sign the attached application with documentation for Cambridge residency, household size and emergency need.</u>

<u>Applications without proper documentation of Cambridge residency, household size and emergency may not be placed in the appropriate pool.</u> If you have any questions, please call CDD at 617-349-4622.

Please note that the Community Development Department will maintain applications in the Rental Applicant Pool. CDD will accept updates and/or changes to an applicant's preliminary application in writing only. Applicants should notify the CDD in writing of changes to household size and income, voucher status, residency, employment or emergency need.

CDD reserves the right to request that applicants submit updated and/or supporting documentation. Applicants who fail to respond to requests from CDD promptly may be removed from the Rental Applicant Pool.

STEP 1: MINIMUM ELIGIBILITY CRITERIA:

- Applicant's household size must be appropriate for the unit. (See attached Occupancy Standards.)
- Households must have an income of at least 50% but not more than 80% of the Area Median Income. See the chart below.
- Individuals and families with mobile rental subsidies will not be subject to the required minimum income requirements.
- Household assets may not exceed \$75,000. Assets in restricted retirement accounts (401(k), IRA, etc) will be considered at 60% of current value. Households where all members are 62 or over, and households where all members are disabled, may be eligible for special consideration.

Current Income Limits (Income Limits are subject to change.)

| Qualifying for a studi | <u>o</u> | | |
|-------------------------------|----------------|----------------------------------|--|
| Household Size | Minimum Income | Maximum Income | |
| 1 person | \$34,500 | \$55,200 | |
| Oualifying for a one-b | <u>oedroom</u> | | |
| Household Size | Minimum Income | Maximum Income \$55,200 | |
| 1 person | \$34,500 | | |
| 2 persons | \$39,400 | \$63,040 | |
| Oualifying for a two-l | oedroom | | |
| Household Size | Minimum Income | Maximum Income | |
| 2 persons | \$39,400 | \$63,040 \$70,960 \$78,800 | |
| 3 persons | \$44,350 | | |
| 4 persons | \$49,250 | | |
| Qualifying for a three | -bedroom | | |
| Household Size | Minimum Income | Maximum Income | |
| 3 persons | \$44,350 | \$70,960 | |
| 4 persons | \$49,250 | \$78,800 | |
| 5 persons | \$53,200 | \$85,120 | |
| 6 persons | \$57,150 | \$91,440 | |

STEP 2: REQUIRED INCOME & HOUSEHOLD INFORMATION LISTED ON APPLICATION: A. Income from employment:

- Complete income information for household members who are employed full and/or part time unless he/she is a dependent and is registered as a full-time
- Student in an undergraduate degree program
- **B.** Income from other sources:
- Complete this section on the housing application if applicable to your household
- C. Household Assets:
- Complete this section listing the assets of all household members
- D. Household Size:
- include all household members who will be living in the unit on your application

Step 3: DOCUMENTATION REQUIRED WITH APPLICATION:

A. HOUSEHOLD SIZE REQUIREMENT:

Please provide evidence of your current household size from <u>two</u> of the following options (Additional documentation may be requested):

- A rental lease signed and dated within the last year in your name and members of your household
- A copy of your signed current federal tax return with W's 2 which indicate your current household size
- A copy of birth certificates for all household members

B. CAMBRIDGE RESIDENCY REQUIREMENT:

If you are currently living in Cambridge, please provide evidence of residency from two of the following options (additional documentation may be requested):

- A current rental lease signed and dated within the last year in your name or a Section 8 Agreement.
- A utility bill in your name: original gas, electric dated within last thirty days.
- A car registration and/or driver's license or Massachusetts I.D. with your current address that is listed on your application.
- A current school registration record for your child with current address.

C. EMERGENCY NEED REQUIREMENT:

Households with one or more of the following Emergency Needs: If you are claiming an emergency you MUST attach a copy of the evidence supporting your emergency situation):

- Applicant is currently facing a no-fault eviction (Provide a copy of court order).
- Applicant is living in a property that has been cited by the City for outstanding code violations (provide report from Inspectional Services Department).
- Applicant is paying more than 50% of their monthly gross income on rent (submit documentation of current rent receipt and lease agreement).
- Applicant is living in an overcrowded situation defined as having more than two individuals per bedroom (provide a signed lease).
- Applicant is homeless (provide a letter from shelter).

The Community Development Department reserves the right to request additional documentation to determine eligibility and preferences.

ASSIGNMENT FOR PRIORITY POINT SYSTEM:

Preference will be given to Cambridge residents, families with children, and applicants with an emergency housing need. All applications will be reviewed for eligible household size and income eligibility and then ranked in order by the following priorities:

- A. Current Cambridge Resident
- B. Household with at least one child under 18
- C. Household with at least one child under 6
- D. Household with emergency need as defined in step 3.

Please Note: After all eligible resident applicants have been considered preference will be given to applicants who are not presently living in Cambridge but are employed in Cambridge. These applicants will follow the same priority point system as Cambridge residents. Contact the Community Development Department for further information.

RENTAL POOL ORDER:

Upon receipt of the completed preliminary application and all associated documentation, CDD will notify all applicants of their status by mail. Preliminary applications will be added to the appropriate pool(s) in the order they are received.

The Rental Applicant Pool will consist of the following:

3 bedroom unit pool

- a) 7 point preference group
- b) 6 point preference group
- c) 5 point preference group
- d) 4 point preference group
- e) 3 point preference group
- f) 2 point preference group
- g) 1 point preference group
- h) 0 point preference group

2 bedroom unit pool

- a) 7 point preference group
- b) 6 point preference group
- c) 5 point preference group
- d) 4 point preference group
- e) 3 point preference group
- f) 2 point preference group
- g) 1 point preference group
- h) 0 point preference group

1 bedroom/studio unit pool

- a) 5 point preference group
- b) 4 point preference group
- c) 3 point preference group
- d) 2 point preference group
- e) 1 point preference group
- f) 0 point preference group



AVAILABLE UNITS:

As units become available, applicants who are at the top of the appropriate preference group for the available unit size will be asked to submit a complete application to confirm eligibility.

Complete applications will be reviewed and applicants who are found to be eligible will be forwarded to unit owners/managers for credit checks, landlord references, etc. Eligible applicants who are approved by the property owner/manager will be offered a unit based on their order in the Rental Applicant Pool.

Applicants will be shown a unit and will have 24 hours to make a decision whether to lease the unit. If an applicant declines available units at three separate properties, the applicant will be placed at the bottom of the pool of their preference group and will not be offered a unit for up to 180 days.

Applicants who are declined by four different management companies for credit or landlord reference will be removed from the pool. Applicants who are denied due to CORI or other criminal background check by two different management companies will be removed from the pool. Notification to the applicant will be made in writing by the management company that denied their application.

If an applicant decides to move forward to lease a unit, they will enter into a lease agreement with the property manager to move into the unit within 30 days.

If you have any questions about the Rental Applicant Pool, please call Housing Line at 617-349-4622. Please leave your name and daytime phone number where you can be reached.



Occupancy Standards

(Based on federal Section 8 regulations)

To Determine Unit Size

- 1. To determine appropriate unit size for an applicant, the following criteria shall be used:
 - a. No more than two persons shall occupy the same bedroom.
 - b. Persons of the opposite sex (other than a couple) shall not be required to share a bedroom.
 - c. Two children of the same sex shall share a bedroom unless the difference in their ages is 10 years or more.
- 2. Families may choose to under-house themselves based on the following:
 - a. Children of opposite sexes may share a bedroom if the sum of their ages is 15 or less.
 - b. Children of the same sex may occupy the same bedroom regardless of age.

How to Determine Household Size

- 1. Eligible household size is based on all current, full-time and permanent household members at the time of application.
 - a. All household members must have had the same address as the applicant for at least 3 months from the time the application is submitted.
 - b. Only children that are born before the application deadline or are expected within two months of the application deadline (as documented by a medical professional) will be counted as household members.
 - c. Children of applicants, who are full-time students age 18 years and over and living in a college dormitory, will be considered part of the household if they are listed as dependents on their parent's tax return.
- 2. Applicants must be able to document, to the satisfaction of the City of Cambridge, that any recent additional members to their household are permanent, full-time members.
- 3. Those household members not listed on the most recent year's federal tax return as dependents of the applicant will be required to document that they have resided with the applicant for at least 3 months from the date of application.
 - a. Household members not listed as dependents will be required to sign a notarized affidavit stating their intention to remain as permanent full-time members of the applicants' household for the foreseeable future.

How to Determine Income Eligibility

| Minimum Income Eligibility Chart for Housing Assistance | | | | | | | |
|---|----------|-----------|-----------|-----------|-----------|-----------|--|
| | 1 person | 2 person | 3 persons | 4 persons | 5 persons | 6 persons | |
| Income | \$34,500 | \$39,400 | \$44,350 | \$49,250 | \$53,200 | \$57,150 | |
| Maximum Income Eligibility Chart for Housing | | | | | | | |
| Assistance | | | | | | | |
| | 1 person | 2 persons | 3 persons | 4 persons | 5 persons | 6 persons | |
| Income | \$55,200 | \$63,040 | \$70,960 | \$78,800 | \$85,120 | \$91,440 | |

The income chart is based on federal, state, and Cambridge income limits for housing programs. These limits are determined by the US Dept. of Housing and Urban Development and are subject to change.

City of Cambridge Community Development Department, Housing Division 344 Broadway, 3rd floor Cambridge, MA 02139



INCLUSIONARY HOUSING RENTAL PROGRAM RENTAL PRELIMINARY APPLICATION

| First Name: | Mic | ddle Initial: | |
|---|---|--|--|
| First Name: | Mide | Middle Initial: | |
| Unit # | City: | State: | |
| (day):Telep | phone # (evening): | | |
| | | | |
| Married□ Separated □ | Divorced | □ Other | |
| re? | | | |
| ? If Yes, What is the subsidizing a | igency? | | |
| ry Housing Rental unit in Cambrid | lge? If Yes, When? | | |
| | | | |
| estate property? If yes please expla | in □ Yes □ No | | |
| Studio One-bedroom | □ Two-bedroom | □ Three bedroom | |
| ION | aabald sina | | |
| mbridge residency House | senoid size | □ Emergency need | |
| , birth dates, and relationship to head of ho | | - , | |
| Ç | | - , | |
| , birth dates, and relationship to head of ho | ousehold of each person w Relationship to | who will reside in the Gender | |
| , birth dates, and relationship to head of ho | ousehold of each person w Relationship to Applicant | who will reside in the Gender | |
| , birth dates, and relationship to head of ho | ousehold of each person w Relationship to Applicant | who will reside in the Gender | |
| , birth dates, and relationship to head of ho | ousehold of each person w Relationship to Applicant | who will reside in the Gender | |
| r :: | First Name: | Married□ Separated □ Divorced Telephone # (evening): Married□ Separated □ Divorced Te? If Yes, What is the subsidizing agency? Ty Housing Rental unit in Cambridge? If Yes, When? State property? If yes please explain □ Yes □ No Studio □ One-bedroom □ Two-bedroom | |

Applicants must notify the CDD in writing of changes to household size and income, voucher status, residency, employment or emergency need. CDD reserves the right to request that applicants submit updated and/or supporting documentation.

EMERGENCY NEED

Does your household have an emergency need for housing? <u>Required documentation as described in the guidelines must be included to be considered for an emergency need.</u>

- Applicant is currently facing a no-fault eviction *Provide a copy of court order*).
- Applicant is living in a property that has been cited by the City for outstanding code violations (*Provide report from Inspectional Services Department*).
- Applicant is paying more than 50% of their monthly gross income on rent <u>Submit documentation of current rent</u> receipt and lease agreement).
- Applicant is living in an overcrowded situation defined as having more than two individuals per bedroom (*Provide a lease*).
- Applicant is homeless (provide a letter from shelter).

EMPLOYMENT INFORMATION FOR ALL HOUSEHOLD MEMBERS

| Last Name, First Name | Total Income and Frequency of Pay | Source of Income |
|--------------------------|-----------------------------------|------------------|
| | \$ /per | |

ADDITIONAL INCOME SOURCES OTHER THAN EMPLOYMENT

| a) | RETIREMENT INCOME OR DISABILITY AWARD: | | | |
|----|--|--|--|--|
| | Name of Recipient: | | | |
| | Name of Company:Amount of Monthly Income: \$ | | | |
| b) | SOCIAL SECURITY INCOME: | | | |
| | Name of Recipient:Gross Monthly Amount: \$ | | | |
| c) | VETERAN'S ASSISTANCE: | | | |
| | Name of Recipient: Gross Monthly Amount: \$ | | | |
| d) | PUBLIC ASSISTANCE: | | | |
| | Name of Recipient:Gross Monthly Amount: \$ | | | |
| e) | UNEMPLOYMENT: | | | |
| | Name of Recipient: | | | |
| | Weekly Amount: \$When did benefits start?When do they expire? | | | |
| f) | INTEREST/DIVIDEND: (In excess of \$100.00) | | | |
| | Name of Recipient:Source of Interest:Annual Interest: \$ | | | |
| g) | CHILD SUPPORT/ALIMONY Amount Received: \$Payment(s): Monthly:Weekly:Bi-weekly: | | | |

| Institution: | Current Balance: \$ |
|--|---|
| | Current Balance: \$ |
| | |
| List all checking accounts of appli | |
| Institution: | Current Balance: \$ |
| Institution: | Current Balance: \$ |
| | |
| Department will provide auxiliar modifications in policies and pro CERTIFICATIONS I understand that this form is remake any plans to move or end | ty Development Department does not discriminate based on disability. The y aids and services, written materials in alternative formats, and reasonable cedures to persons with disabilities upon request. The total persons with disabilities upon request. The total persons with disabilities upon request. The total person with disabilities upon request. The total person with disabilities upon request. |
| reasonable accommodation and under penalty of perjury, all in understand that false informat | pment Department, Housing Division of any change of address, income, I family composition or my application will be withdrawn. I/We certify, formation on this application to the best of my/our knowledge is true. I/We ion given is sufficient grounds for rejection of this application. be obtained from any source herein. |
| agency of the United States kno statements or representations, contain any false, fictitious or f imprisoned not more than five | es: "Whoever, in any matter within the jurisdiction of any department or owingly and willfully falsifies Or makes any false fictitious or fraudulent or makes or uses any false writing or document knowing the same to raudulent statements or entry, shall be fined not more than \$10,000 or |
| Signature: | Date: |
| Signature: | Date: |





REVIEW DOCUMENTATION REQUIRED WITH APPLICATION:

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- A copy of your signed current federal tax return with W's 2 which indicate you're current
- Household size
- A copy of birth certificates for all household members

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- A car registration and/or driver's license or Massachusetts I.D. with your current address that is listed on your application
- A current school registration record for your child with current address

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- Documentation of current rent receipt and lease agreement).
- Applicant is living in an overcrowded situation defined as having more than two individuals per bedroom (Provide a signed lease).
- Applicant is homeless (provide a letter from shelter).